#### Non-Confidential Summary of Safety and Effectiveness

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Polar Wrap LLC

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APR 17 2007

**Official Contact:** 

Bruce McCormick, President

**Proprietary or Trade Name:** 

Health Mask

Common/Usual Name:

Respiratory humidifier mask (direct patient interface)

**Classification Name:** 

Respiratory humidifier mask (direct patient interface)

Device:

Health Mask

**Predicate Devices:** 

Pegasus - PMH500 Heated humidifier - K020700

RESPeRate - K020399

#### Device Description:

The Health mask is a device worn by an individual outdoors when the air is cold. It is designed to retain the heat and moisture exhaled by the wearer and warm and humidify the inhaled cold air.



The wearer breathes through a thermal medium which retains and returns the heat and moisture in the breathed air.

The Thermal medium is placed inside a fabric mask which the wearer places over their mouth and nose. The mask is held in place with an elastic band.

#### Indications for Use:

Indicated Use --

The Health Mask is intended to moderate the expected

physiological response to cold (i.e., increase in blood pressure).

Patient Population --

Diagnosed hypertensives 18 years or older

Environment of Use --

Outdoors

Contraindications --

None

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# Device Attributes:

	Health Mask
Attributes	
Intended use	To act as a respiratory gas humidifier to add moisture to,
General	and sometimes to warm, the breathing gases for
	administration to the patient.
Intended use	To moderate the expected physiological response to cold
Specific	(i.e., increase in blood pressure).
Environments of use	Outdoors
Patient Population	18+ years old, diagnosed hypertensives
Contraindications	None
Prescription	Prescription
Design	
External device covering patient to	Placed over the mouth and worn like a mask
reduce heat loss	
Retains heat to be returned to patient	Yes
Materials	
Thermal medium	Wire (copper) mesh
Housing / HME Mask Shell	Wrap – polypropylene and polyester with elastic band to
	hold the device around the head
Air Chamber Shell	Polypropylene
Performance	
Low resistance to work of breathing	1.6 cm H <sub>2</sub> O at 60 Lpm, less than typical resistance to
or flow	flow
	(< 5 cm H <sub>2</sub> O) guidelines for devices in the breathing system

#### Differences Between Other Legally Marketed Predicate Devices

The Health Mask is viewed as substantially equivalent to the following predicate devices – Pegasus – PMH500 Heated humidifier – K020700 for technology under CFR 868.5450 and RESPeRATE – K020399 for indications for use under CFR 882.5050, a non-invasive biofeedback device intended to lower blood pressure by guiding and monitoring patients breathing.

There are no significant differences that affect the safety or effectiveness of the intended device as compared to the predicate devices.



Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

## APR 17 2007

Polar Wrap LLC c/o Bruce McCormick, President 6047 Executive Center Drive #8 Memphis, TN 38134

Re: K070467

Trade/Device Name: Health Mask Regulation Number: 21 CFR 868.5450

Regulation Name: Respiratory gas humidifier

Regulatory Class: Class II

Product Code: OBN Dated: February 15, 2007 Received: February 16, 2007

#### Dear Mr. McCormick:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the Federal Register.

#### Page 2 – Mr. McCormick

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050. This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Office of Compliance at (240) 276-0120. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR Part 807.97). You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (240) 276-3150 or at its Internet address <a href="http://www.fda.gov/cdrh/industry/support/index.html">http://www.fda.gov/cdrh/industry/support/index.html</a>.

Sincerely yours,

Bram D. Zuckerman, M.D.

Director

Division of Cardiovascular Devices

Office of Device Evaluation

Center for Devices and

Radiological Health

Enclosure

## **Indications for Use Statement**

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510(k) Number:

K070467

**Device Name:** 

Health Mask

**Indications for Use:** 

The Health Mask is intended to moderate the expected physiological response to cold (i.e., increase in blood pressure). For diagnosed hypertensives 18 years or older.

Prescription Use XX (Part 21 CFR 801 Subpart D)

or

Over-the-counter use \_\_\_\_\_ (21 CFR 807 Subpart C)

(PLEASE DO NOT WRITE BELOW THIS LINE-CONTINUE ON ANOTHER PAGE IF NEEDED)

Concurrence of CDRH, Office of Device Evaluation (ODE)

(Division Ston-Off)

Division of Cardiovascular Devices

510(k) Number\_

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